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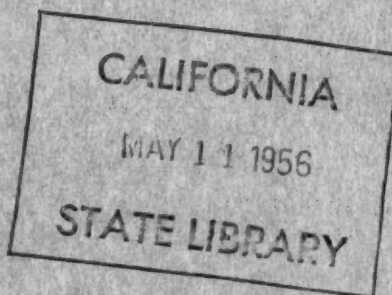
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REHABILITATION LITERATURE is compiled for use primarily by physicians, occupational, physical and speech and hearing therapists, nurses, welfare workers and administrators, school administrators and teachers of exceptional children, psychologists, vocational counselors and employment personnel, and for students entering these professions.

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The Library serves:

1. Professional and volunteer workers.
2. The handicapped, their families and friends.
3. Educational institutions and libraries.
4. Health and welfare agencies, both voluntary and governmental.

AMPUTATION

476. Bechtol, Charles O. (789 Howard Avenue, New Haven 4, Conn.)
The juvenile amputee. Pediatric Clinics N. Am. Nov., 1955. 2:4:1121-1128. Reprint.
Even though child amputees are more adaptable to the wearing of a prosthesis, less attention has been paid this type of disability than other similar orthopedic disabilities in childhood. The author discusses stump problems encountered in children, the totally different problems presented by leg and arm amputations, the fitting of prostheses, training and follow-up, parent education and attitudes toward the child with an amputation, and the necessity for the team approach to accomplish complete care of the amputee.
477. Frantz, Charles H. (Amputee Clinic, Mary Free Bed Children's Hosp. and Orthopedic Center, Grand Rapids, Mich.)
Child amputees can be rehabilitated. Children. Mar.-Apr., 1956. 3:2:61-65.
Nearly ten years' experience working with child amputees at the Mary Free Bed Children's Hospital has shown the potential for complete rehabilitation of children with congenital or accidentally caused amputation. Discussed are the fitting and training in use of a prosthesis, proper time for fitting, parent attitudes, and special services provided by the Amputee Clinic of the Hospital.

AMPUTATION--EQUIPMENT

478. Leimkuehler, Paul E.
What should prostheses cost? J. Rehabilitation. Nov.-Dec., 1955. 21:6:20-22, 25.
Discusses factors which influence the original cost of the prosthesis, how the raising of professional standards in the limb and brace industry is reflected in higher original costs but lowers over-all costs of total rehabilitation, and the margin of profit to which the manufacturer and fitter are entitled.

AMPUTATION--RECREATION

479. Lorenzen, H.
The limits of athletic activity for the disabled. Rehab. Bul., World Veterans Fed. Jan., 1956. 10:19-23.
Reprinted from: Artz und Sport (Germany). 1955. No. 3.
A discussion of the debatable value of hopping exercises, broad jumping, and high-jumping for the person with one leg amputated. Participation with and without the use of a prosthesis is described.

APHASIA

480. Schuell, Hildred (Neurology Section, V. A. Hosp., Milwaukee, Wis.)
Diagnosis and prognosis in aphasia. Arch. Neur. and Psychiatry. Sept., 1955. 74:3:308-315. Reprint.
Presents findings of test results of 56 aphasic patients, classified according to pattern of impairment, and analyzed for their diagnostic and prognostic significance. A frame of reference for the classification of

APHASIA (continued)

aphasic patients according to patterns related to cerebral systems and language modalities is offered. Differential diagnosis is possible through relatively simple procedures described here. General principles of treatment are indicated for each group.

ARTHRITIS--MEDICAL TREATMENT

481. Preston, Robert L. (30 E. 60th Street, New York, New York)

The rehabilitation of the patient with rheumatoid arthritis. N. Y. State J. Med. Oct. 15, 1955. 55:20:2887-2896. Reprint.

Principal cause of deformities occurring in rheumatoid arthritis is the change in soft tissue in and around the joint; in most instances pathologic changes in the cartilaginous and bony elements of the joint are not an important cause of functional disability. Prevention and correction of deformities, in a high percentage of cases, can be affected, the author believes, by treatment appropriate to the pathologic changes present, by effective therapy, and through cooperation of the patient in the postoperative rehabilitation program. A program for these patients is presented in detail through a report of treatment of a typical case.

ARTHRITIS--PHYSICAL THERAPY

See 556.

AUDIOMETRIC TESTS

482. Downs, Marion P. (Hearing and Adult Speech Center, Univ. of Denver, 2111 S. St. Paul Street, Denver, Colo.)

The Familiar Sounds test and other techniques for screening hearing. J. School Health. Mar., 1956. 26:3:77-87.

A survey of presently available screening techniques for testing school children, and a report on a new type of test for preschool children, using filtered familiar sounds. It was found to be more effective than the Individual Pure Tone Sweep Test. In a pilot study by the University of Denver on 349 three-year-old children in the public school preschool program, the test detected hearing loss in 96 per cent of those with significant hearing loss. Not only is it more adequate than the pure tone method, but also easier to administer.

AUDIO-VISUAL AIDS--DIRECTORIES

483. American Foundation for the Blind (15 W. 16th St., New York 11, N. Y.)

Films relating to blindness and work with blind persons. New York, The Foundation, 1956. 20 p. 35¢.

A listing of films, television films, filmstrips, and slide films concerned with blindness and work with the blind; full information on source and description of the materials is supplied by the owners or distributors. Entries are annotated and classified under such subjects as adult blind, preschool blind child, guide dogs, recreation, and prevention of blindness. No attempt at evaluation of the films is made.

BLIND

484. Carroll, Thomas J. (Catholic Guild for the Blind, 49 Franklin Street, Boston 10, Mass.)

New techniques in training the blind. J. Assn. Phys. and Mental Rehab. Jan.-Feb., 1956. 10:1:6-8.

BLIND (continued)

New trends and techniques in training the adult blind in rehabilitation centers are discussed, in particular, St. Paul's Rehabilitation Center for the Newly Blind, Newton, Mass. The author outlines twenty "losses" occurring with the onset of blindness and tells of some of the ways in which the Center attempts to help the blind person compensate for them.

BLIND--AUDIO-VISUAL AIDS

See 483.

BLIND--EMPLOYMENT

485. Cummings, Francis J. (Delaware Commission for the Blind, 305-307 W. 8th Street, Wilmington 1, Del.)

Blind professional personnel on agency staffs. New Outlook for the Blind. Mar., 1956. 50:3:95-98.

In this paper read at the 1955 convention of the American Assn. of Workers for the Blind, the writer presents the thinking of eight leaders in the field on the use of blind professional personnel in agencies serving the blind. General agreement on the use of qualified blind personnel for agency staffs was found among experienced workers for the blind. Some of the problems posed by blind staff members and jobs suitable for them are discussed briefly.

BLIND--ETIOLOGY

See 531.

BLIND--INSTITUTIONS--MICHIGAN

486. Hearn, Norman E. (M. O. Box 480, Lansing, Mich.)

Educational opportunities at their finger tips at the Michigan School for the Blind. Mich. Education J. Mar. 1, 1956. 33:13:320-322.

Describes admission requirements for children attending the Michigan School for the Blind, the curriculum, special classroom equipment used at the school, extra-curricular activities, qualifications and salaries of the staff, and a brief historical sketch of the school's background.

BLIND--PARENT EDUCATION

See 589.

BLIND--RECREATION

See 543.

BLIND--SPECIAL EDUCATION

487. Bailey, Jane Lee (Longden Avenue School, Unified School District, Temple City, Calif.)

Meaningful maps for the blind and seeing. New Outlook for the Blind. Mar., 1956. 50:3:77-83.

A paper to suggest ways for teachers to aid the blind child in using maps more effectively. Discussed are the blind child's "readiness" for map reading, the presentation of flat maps, types of maps suitable for use with the blind, and a cork map which the author has found useful in her experience as a teacher in the resource room. Materials, tools, and steps in construction of the map are described in the appendix. This paper was written as one of the course requirements in work for the Master's degree in Education.

BLOOD VESSELS

488. Harpuder, Karl (Montefiore Hosp., 210th St. and Bainbridge Avenue, Bronx 67, N. Y.)

Rehabilitation of the patient with arterial disease of the limbs.

Geriatrics. Oct., 1955. 10:10:451-455. Reprint.

"Rehabilitation of the patient with peripheral arterial disease may include psychiatric care, physical care and training of the amputee, and adjustment of the patient and his family to a new and restricted way of life. Each type of arterial disease--Raynaud's syndrome, thromboangiitis obliterans, and obstructive arteriosclerosis--requires a totally different program of rehabilitation."

BONES

489. Billenstein, Dorothy C. (Univ. of Colorado Med. School, Denver, Colo.)

Dissuse atrophy of bone with special reference to physical rehabilitation. Phys. Therapy Rev. Mar., 1956. 36:3:169-173.

Reviews various aspects of the problem of bone atrophy, present status of roentgenographic measurement, and the feasibility of utilizing roentgenograms routinely in the evaluation of disuse atrophy of bone. Special reference is made to the occurrence of bone atrophy in the physically disabled; pathological fractures, occurring in severe cases of bone atrophy, are most frequently observed in children under the age of 10 with spinal cord lesions.

BOWLEGS

490. Stelling, Frank H. (9-11 Medical Ct., Greenville, S. C.)

Bowlegs and knock knees in childhood, by Frank H. Stelling and Leslie C. Meyer. Pediatric Clinics N. Am. Nov., 1955. 2:4:1053-1071. Reprint.

Includes a discussion of the etiology of deformities of the lower extremities, a simplified classification of these deformities, and the recognition and treatment of ligamentous abnormalities, congenital developmental defects, the Vitamin D deficiency diseases, and deformities due to injury. Congenital developmental defects are now considered the main cause of bowleg and knock knee deformities; if started early, treatment is simple and good results may be obtained.

BRAIN INJURIES

491. Pasamanick, Benjamin (Ohio State Univ. Coll. of Med., Columbus, Ohio)

Pregnancy experience and the development of behavior disorder in children, by Benjamin Pasamanick, Martha E. Rogers, and Abraham M. Lilienfeld. Am. J. Psychiatry. Feb., 1956. 112:8:613-618. Reprint.

One of a series of studies by the authors of the prenatal and paranatal records of children with behavior disorders born in Baltimore after 1939. A relationship between complications of pregnancy and prematurity and the presence of neuropsychiatric disorders has been demonstrated. From findings, "a hypothesis of a continuum of reproductive casualty is formulated consisting of brain damage incurred during these periods leading to a gradient of injury extending from fetal and neonatal death through cerebral palsy, epilepsy, mental deficiency, and behavior disorder. The implications of this continuum are discussed with regard to further research in the etiology, diagnosis, management, and prevention of these neuropsychiatric disorders."--Summary.

CAMP FIRE GIRLS

492. Denlay, Harriett

Opportunity to belong. Camp Fire Girl. Apr., 1956. 35:8:3.

In spite of the limitations of various physical disabilities, handicapped girls need the opportunity to participate in group activities such as Camp Fire Girls. Particular problems which their membership presents to the group leader are discussed briefly.

CEREBRAL PALSY

493. Abbott, Marguerite

Cerebral palsy; its scope and management. New York, Public Affairs Committee, c1956. 28 p. (Public Affairs pamph. no. 158A)

A booklet giving basic information on cerebral palsy, its incidence and prevalence, basic causes and diagnostic classifications, evaluation of intelligence and degrees of handicaps, various aspects of treatment, and the role of the community in providing facilities for the total habilitation of the cerebral palsied. Aid available from national, civic and voluntary agencies is briefly described as well as legislation and opportunities for training professional personnel in the field. Includes a brief bibliography.

Available from Public Affairs Committee, 22 E. 38th Street, New York 16, New York, at 25¢ a copy.

494. American Academy for Cerebral Palsy

Infantile spastic hemiplegia. 10 p. illus. Reprint.

A reprint of the exhibit of the . . . from the June, 1955 meeting of the American Medical Association. This set of illustrations will appear in the book "A.M.A. Scientific Exhibits, 1955," to be published by Grune & Stratton in 1956.

The exhibit of the Brain Registry of the American Academy for Cerebral Palsy illustrated various malformations and traumatic causes of cerebral injury which cause cerebral palsy in the newborn and post-natal period, the differential diagnosis of postnatal and prenatal pathology, and correlation between the clinical entity and pathologic findings.

495. Stepanek, Margaret B. (3420 8th Avenue, S., Birmingham 5, Ala.)

Questions teachers ask about cerebral palsied children. Birmingham, Ala., the Author, 1955. 25 p. illus. 75¢.

A pamphlet written by a teacher of cerebral palsied children who is cerebral palsied herself, it discusses briefly the nature of the condition; how the classroom teacher may acquaint herself with the facts about the cerebral palsied child and his problems; the physical limitations imposed on the child; the psychological, social and educational aspects of cerebral palsy; and how the classroom teacher may aid the child in the regular classroom.

See also 570; 571.

CEREBRAL PALSY--DIAGNOSIS

496. Phelps, Winthrop M. (3038 St. Paul St., Baltimore 18, Md.)

Classification of athetosis with special reference to the motor classification. Am. J. Phys. Med. Feb., 1956. 35:1:24-31.

CEREBRAL PALSY--DIAGNOSIS (continued)

"... The classification which will be considered mainly at this time is the motor classification, which is important chiefly in regard to methods of treatment and to further studies with regard to localization of the different parts of the extrapyramidal mechanisms of the brain . . . there are twelve readily identifiable entities which can be definitely and easily recognized" The clinical signs of each are discussed.

CEREBRAL PALSY--MEDICAL TREATMENT

497. Deaver, George (111 E. 76th St., New York, New York)

Treatment of the spastic hemiplegic. Am. J. Phys. Med. Feb., 1956. 35:1:32-34.

Purpose of treatment for the spastic hemiplegic, as Dr. Deaver views it, is to prevent or correct deformities, provide training for affected extremities to insure the maximum functional capacity, teach self-care activities and the ability to care for daily needs, and provide training to walk properly.

CEREBRAL PALSY--PARENT EDUCATION

498. Winstead, Bill

Suggestions to parents of the cerebral palsied. Child-Family Digest. Mar., 1956. 14:3:89-93.

"Having been for years both patient and keen observer at the Cerebral Palsy Training Center in Norfolk, Va., this author speaks with the knowledge of an Honor Graduate of the School of Experience. . . ."--Ed. note. He discusses the effects of harmful parent attitudes on the cerebral palsied child and the child's feelings and reactions to overprotection by parents.

CEREBRAL PALSY--PSYCHOLOGICAL TESTS

499. Shere, Marie Orr (1009 West Clark St., Urbana, Illinois)

Socio-emotional factors in families of the twin with cerebral palsy. Exceptional Children. Feb., 1956. 22:5:197-199, 206, 208, 210.

A report of a study of 30 pairs of twins, one member of each pair having been diagnosed as cerebral palsied. Parental attitudes and the adjustment of both the cerebral palsied and nonhandicapped twin were investigated. Conclusions of earlier studies, that parental behavior is reflected in the behavior of the children, are supported by this study which also appears to suggest that the condition of cerebral palsy can be more harmful to the social and emotional development of the non-cerebral palsied child than to the cerebral palsied twin. An abstract of this study was previously annotated in Rehabilitation Literature, Jan., 1956, #22.

CHILDREN--GROWTH AND DEVELOPMENT

500. Gesell, Arnold (310 Prospect St., New Haven 11, Conn.)

The psychological development of normal and deaf children in their preschool years. Volta Rev. Mar., 1956. 58:3:117-120.

Discusses the psychological growth of the hearing child, how that of the deaf child follows essentially the same pattern, the dangers inherent in too heavy and too early demands on speech skills of the deaf child, and the need to realize that the fundamental objective is not speech but socialization. Signs suggestive of deafness in infants and young children are outlined. Dr. Gesell believes that the home life of the deaf child should be strengthened in the first five years of life. He recommends the day nursery school as an adjunct to the home.

CHILDREN--GROWTH AND DEVELOPMENT (continued)

See also 549; 561.

CHILDREN (DEPENDENT)

See 593.

CHILDREN'S HOSPITALS

See 501; 566.

CHILDREN'S LITERATURE--BIBLIOGRAPHY

501. Flandorf, Vera S.

Books to help children adjust to a hospital situation. Hosp. Book Guide. Feb., 1956. 17:2:24-29. Mimeo.

A checklist of 89 books that have been used successfully with younger or older children in a children's hospital, compiled by the Librarian at Children's Memorial Hospital, Chicago. Very brief annotations and age for which the books are suitable add to the usefulness of the checklist. The subject index will be helpful in making a careful choice based on special needs of the child, his reading ability and interests.

Single copies available free from the Library, National Society for Crippled Children and Adults.

CHIROPODY

502. Crystal, Arthur (34 Atlantic Avenue, Lynbrook, N. Y.)

Foot deviations and their relation to inferiorities. J. Natl. Assn. Chiropodists. Aug., 1955. 45:8:21-24. Reprint.

Describes the effects of feelings of inferiority due to faulty posture, gait, or the feet. Parental attitudes toward an actual handicap in the child can determine the child's eventual adjustment to the handicap and affect his attitudes toward society. Advice is given the chiropodist or other professional men on ways of helping patients overcome these feelings of inferiority.

CHRONIC DISEASE--PROGRAMS

503. Zelditch, Morris (192 Lexington Avenue, New York 16, New York)

The long term patient; a medical and community responsibility. Public Health News, N. J. State Dept. of Health. Mar., 1956. 37:3:89-95.

In same issue: What the state department of health is doing in the care of the chronic sick, by Marian R. Stanford, p. 96-103.

A discussion of the extent of chronic illness, problems associated with the welfare and care of the chronically ill, community responsibility in solving these problems, and types of services to meet the need for long-term care.

Dr. Stanford describes various activities of the Division of Chronic Illness Control, N. J. State Department of Health, aimed at the prevention, early detection and control and rehabilitation of the chronically ill.

(see also #547.)

CHRONIC DISEASE--STUDY UNITS AND COURSES

504. McCluskey, Audrey M. (Cornell Univ. -N. Y. Hospital School of Nursing, 525 E. 68th St., New York 21, New York)

Students' experience with chronic disease patients. Nursing Outlook. Mar., 1956. 4:3:170-172.

CHRONIC DISEASE--STUDY UNITS AND COURSES

A special "Chronic Illness and Rehabilitation" program, part of the basic curriculum at Cornell University-New York Hospital School of Nursing, offers students an opportunity for new experience in chronic illness nursing. Various aspects of the program and its value to the chronically ill patient and the student nurse are described.

CHRONIC DISEASE--SURVEYS--CANADA

505. Canada. Ottawa. Council of the City

Study of the needs of older and chronically ill persons in the City of Ottawa, by Marjorie Bradford. Ottawa, Canada, The Council, 1955. 87 p. graphs.

A condensed report on the unmet needs among older and chronically ill persons in Ottawa, it covers a selective census of older and handicapped persons requiring community services, a limited canvass of handicapped and older persons receiving services from non-institutional agencies, and a discussion of persons in permanent or long term care in institutions and private nursing homes. Recommendations for follow-up action and a program planned to carry out the recommendations are included. The study is concerned with hospitalization and home care services of the older age group of its population.

CLEFT PALATE

506. Baker, Herbert Koepp (Western Carolina Coll., Box 56, Highlands, N. C.)

The multidiscipline approach to the treatment of the child with cleft palate. J. Internatl. Coll. Surgeons. Sept., 1955. 24:3:367-369. Reprint.

The needs of the cleft palate child are best met by a treatment program carried out by a team of specialists who work together on the various problems presented by the child. The ability to communicate with members of other specialties and to be informed on specialties other than one's own is essential for members of the team if clinical services are to be improved.

507. Cleft lip and palate. J. Am. Med. Assn. March 17, 1956. 160:11:977.

An editorial.

A brief review of the incidence, etiological factors, results of surgical treatment, and the proper time for surgery in cleft lip and palate. Complete rehabilitation of the child with cleft lip or palate and the specialties involved in the process are considered. 11 references.

CONGENITAL DEFECT--ETIOLOGY

508. Chapple, C. C. (3051 Idaho Avenue, N. W., Washington 16, D. C.)

Possible mechanisms of some congenital defects. Am. J. Obstet. and Gynec. Oct., 1955. 70:4:711-719. Reprint.

A discussion of the agents, suspected or proved, which induce developmental defects, and the neuro-hormonal mechanisms which each, or all, might employ.

CONVALESCENCE--RECREATION

509. Ryland, Gladys (Tulane Univ., New Orleans, La.)

Mardi Gras, by Gladys Ryland, Matilda Alford, and Elizabeth Nowlin. Crippled Child. Feb., 1956. 33:5:10-12.

CONVALESCENCE--RECREATION (continued)

How Mardi Gras was celebrated by 20 children hospitalized in the crippled children's ward of Tulane University Hospital. The many values provided by the recreational experience are explained by the authors-- social work students and their professor in social group work. While the theme of this project was definitely local, the idea could be adapted to any event or special occasion.

DEAF

See 500.

DEAF--DIRECTORIES

See 594.

DEAF--SPECIAL EDUCATION

510. Slow learning deaf children can learn. Volta Rev. Mar., 1956. 58:3:101-102.

The author of this article, who asked to remain anonymous, is a teacher at a residential school for the deaf. Described here is a program set up for children who are not making satisfactory progress in school, with some of the methods found successful in stimulating learning in the slow learning child who is deaf.

DEAF-BLIND--SPECIAL EDUCATION

511. Lantern, The Perkins Institutions. Mar. 15, 1956. 25:3.

Entire issue devoted to the subject.

Contents: Trustees authorize new training course. -Training teachers of the deaf-blind, Daniel J. Burns. -Socialization problems of deaf-blind children. -Problems of diagnosis.

An interim report discussing progress made in the problems of educating the deaf-blind in the past three years.

DECUBITUS ULCER

512. Burston, Isaac (Dept. of Phys. Med. and Rehab., Los Angeles Co. Gen. Hosp., 1200 N. State Street, Los Angeles 33, Calif.)

Decubitus ulcer care, by Isaac Burston, Elizabeth Austin, and Thomas P. Reeder. Phys. Therapy Rev. Mar., 1956. 36:3:174-176.

Nursing procedures and general medical treatment in the prevention of decubitus ulcers are described, as well as medical treatment where ulcers have developed.

DIABETES

See 554.

DISEASE--STATISTICS

513. Charron, K. C. (Dept. of Natl. Health and Welfare, Ottawa, Ont., Canada)

Economic and social consequences of ill health and disability on a national scale. Canad. Med. Assn. J. Oct., 1955. 73:7:542-545. Reprint.

Discusses total health costs in Canada for 1951, and, from the Canadian viewpoint, the effect of disability on productivity, permanent

DISEASE--STATISTICS (continued)

physical disability, the changing health picture, and related social problems. Statistics are included on life expectancy, morbidity, and estimated total expenditures on health in 1951.

EDUCATION--ADMINISTRATION

514. Isenberg, Robert (1201 Sixteenth St., N. W., Washington 6, D. C.)

Every school can have specialized services thru the intermediate unit. N.E.A. J. Mar., 1956. 45:3:174.

In same issue: Instructional materials, Vaughn D. Seidel, p. 175. - In health, physical education, recreation, Robert Keene, p. 176. -For the mentally retarded child, Sheridan Ellsworth, p. 177. -For professional improvement, Howard Wakefield, p. 178-The potential; 4 viewpoints, p. 179.

The intermediate unit, described here, is defined as an administrative organization established to function between the state department of education and local school districts; through the efforts of such an organization special services can be provided in schools where the school district is still too small to make adequate provision for them. The articles following the initial one tell how services can be provided, citing examples of work done in various parts of the country. The final article expresses views of a city superintendent, a county superintendent, chief state school officer, and a professor of administration on the potentials of the intermediate unit.

EMPLOYMENT (INDUSTRIAL)--PLACEMENT

515. National Association of Manufacturers (2 East 48th St., New York 17, N. Y.)

Hiring handicapped people. New York, The Assn., 1955. 16 p.

A guide offering a suggested company policy in regard to hiring of the handicapped, general employment procedures, selective placement, introduction to the job, training, and follow-up. A list of questions and answers on problems arising from employment of the handicapped, its effect on workmen's compensation laws and health, accident, and hospitalization insurance, necessary safety regulations and the necessary medical evaluation of workers, is included. Based on Guide for the Placement of the Physically Handicapped, published by NAM.

516. Odell, Charles E. (Dept. of Labor, Washington 25, D. C.)

The problem of placement. J. Rehabilitation. Nov.-Dec., 1955. 21:6:6-8, 16-17.

More emphasis on the fundamentals of the placement process will result in better acceptance of the physically handicapped as employable, the author feels. The writer describes the purpose of the Functional Occupational Classification Project, conducted by the Occupational Analysis Branch of the Bureau of Employment Security, in supplying guidance and personnel workers with a basic tool for classifying and relating jobs on the basis of psychological and physical demands made on the worker. Factors in counseling and placement services are considered in the light of these concepts; community sources of support are stressed as necessary to successful rehabilitation of the handicapped.

ENDOCRINE DISORDERS

517. Van Wyk, Judson J. (Dept. of Pediatrics, Univ. of N. Carolina School of Med., Chapel Hill, N. C.)

Hypothyroidism in childhood. Pediatrics. Mar., 1956. 17:3:427-437.

ENDOCRINE DISORDERS (continued)

A discussion of types of cretinism, the impact of hypothyroidism on somatic development, the physiological disturbances present and demonstrable, hypothyroidism acquired later in childhood, and treatment of the conditions by thyroid compounds. Controlled studies have, however, failed to demonstrate the value of thyroid therapy in non-endocrine conditions bearing a superficial similarity to hypothyroidism.

EPILEPSY

See 595.

EPILEPSY--MENTAL HYGIENE

518. Caveness, William F. (710 W. 168th Street, New York 32, N. Y.)

Emotional and psychological factors in epilepsy; general clinical and neurological considerations. Am. J. Psychiatry. Sept., 1955. 112:3: 190-193. Reprint.

"Two cases are presented to illustrate the importance of emotional and psychological factors in epilepsy. Attention is directed to the personality changes that arise as a reaction to seizures. It is noted that emotional stress may act as a precipitant to individual seizures. Finally, it is pointed out that elements from past experience, of particular emotional significance, may be incorporated into the clinical pattern of seizures that arise from a discharging lesion in the temporal lobe of the brain."--Summary.

ETIQUET

519. Baer, Elaine

Good manners as seen by. . .from the viewpoint of the handicapped; as seen by Imogene Goll from the viewpoint of the non-handicapped. Crippled Child. Feb., 1956. 33:5:5, 27, 29, 30.

In social relationships by, and with, the handicapped the application of good manners, essential to social acceptance of both the handicapped and non-handicapped, is mandatory. Here are two points of view which will aid in better understanding of the problems involved.

EXERCISE

520. Bilowit, David S. (V.A. Hosp., East Orange, N. J.)

Establishing physical objectives in the rehabilitation of patients with Parkinson's disease (gymnasium activities). Phys. Therapy Rev. Mar., 1956. 36:3:176-178.

Describes a new technic in the physical rehabilitation of Parkinsonian patients whereby exercises to alleviate specific deficiencies are used to complement prescribed medications. Especially successful were exercises such as punching the speed bag, stair climbing, and throwing, catching, or kicking a volley or soccer ball. The program has proved to be beneficial and patients have shown no detrimental effects from it.

FOOT

521. Wilson, Philip D., Jr. (535 E. 70th Street, New York, N. Y.)

Paralytic foot deformities. Pediatric Clinics N. Am. Nov., 1955. 2:4:987-1001. Reprint.

FOOT (continued)

Discusses the incidence and significance of paralytic foot deformities, anatomic and physiologic considerations, etiology and pathology, various deformities and their nonoperative and surgical treatment.

See also 502.

GIFTED CHILDREN

522. Birch, Jack W.

Challenging gifted children, by Jack W. Birch and Earl M. McWilliams. Bloomington, Ill., Public Schools Publ. Co., c1955. 49 p. (Teaching exceptional children in every classroom ser.)

A booklet intended to aid the regular classroom teacher in identifying superior and gifted children, with practical suggestions for enrichment of the curriculum. Ideas presented do not require elaborate changes in school organization or extensive preparation; the emphasis is on what to do and how to do it. Methods are given for all grades from the primary through high school.

Available from Public Schools Publ. Co., 204 W. Mulberry Street, Bloomington, Ill., at \$1.00 a copy.

HANDICAPPED--STATISTICS--CANADA

See 505; 513.

HEALTH SERVICES

523. Public Affairs Institute (312 Pennsylvania Ave., S. E., Washington 3, D. C.)

Health service is a basic right of all the people, by Dewey Anderson. Washington, D. C., The Institute (1956). 70 p. 50¢.

A pamphlet presenting in condensed form the main points of the five volume survey of "Health Needs of the Nation," published in 1952-1953 by the President's Commission on the Health Needs of the Nation. Also given are brief objective descriptions of the various forms of healing and health care, the training involved, type of work and earnings, and professional problems of each. Eight important points concerned with the public's rights and needs in the field of health care are discussed in conclusion.

HEART DISEASE

524. American College of Chest Physicians (112 E. Chestnut St., Chicago 11, Illinois)

Symposium on the rehabilitation of the cardiac patient. Diseases of the Chest. Nov., 1955. 28:5:481-492. Reprint.

Contents: Introduction, Nathaniel E. Reich. -Remarks, Alphonse P. Guardino. -Rehabilitation in traumatic pericarditis, R. W. Kissane. -Methods of evaluating work capacity of cardiacs, John G. Bielawski. -Administrative problems affecting cardiac patients, Jacob Schutzbank.

525. Dodge, H. J. (4200 East 9th Street, Denver 20, Colorado)

Heart disease in school children (follow-up study). Rocky Mt. Med. J. Sept., 1955. 52:9:800-807. Reprint.

HEART DISEASE (continued)

A report of a follow-up study of 315 children diagnosed in an earlier case finding program as having either potential rheumatic heart disease, definite heart disease of any type, or suspected heart disease. Statistics are included on the number of children seen by a private physician as a result of the study, the number under medical care, diagnostic findings on follow-up, those having special diagnostic studies as to heart disease since the original study, and prophylactic measures being taken for prevention of rheumatic heart disease. The original study was undertaken to discover the prevalence of heart disease in Colorado school children.

526. Newman, Louis B. (V. A. Research Hosp., 333 E. Huron St., Chicago 11, Illinois)

Productive living for those with heart disease; the role of physical medicine and rehabilitation, by Louis B. Newman, Reuben R. Wasserman, and Craig Borden. Arch. Phys. Med. and Rehab. Mar., 1956. 37:3: 137-149.

"Statistics presented in the paper . . . show the incidence of heart disease among various age groups, the percentage of total deaths attributed thereto, and the staggering effects of this affliction on the economy of our nation"--Discussion by Dr. Erma A. Smith.

In an attempt to alleviate the deconditioning effects of bed rest, a necessary part of treatment in the acute phases of cardiac disease, the authors (and others) formulated a cardiac rehabilitation program, put into effect June, 1948 at the V. A. Hospital, Hines, Ill. The program and its results are described here.

HEART DISEASE--EMPLOYMENT

527. Olshansky, Simon (17 Tremont Pl., Boston, Mass.)

A survey of employment policies as related to cardiac patients in Greater Boston, by Simon Olshansky (and others). N. Eng. J. Med. Sept. 22, 1955. 253:12:506-510. Reprint.

A condensation of the detailed findings of a study sponsored by the Massachusetts Heart Association in 1954 to discover facts involved in the hiring, rejection, and retention of cardiac patients in industry. A survey of 100 selected industries in Greater Boston revealed employment practices and policies reported here. The threat and risk of workmen's compensation costs appear to be the primary deterrent to employment of the cardiac worker. Existence of suitable jobs and costs of sickness and health insurance are also factors in determining policies.

HEART DISEASE--MEDICAL TREATMENT

528. Buchanan, Josephine J. (Georgetown Univ. Med. School, Washington, D. C.)

Rapid mobilization of cerebrovascular accident patients. Arch. Phys. Med. and Rehab. Mar., 1956. 37:3:150-151.

A report of a study of an active physical medicine treatment program used with 234 patients who suffered acute cerebral infarction. The program was begun one week after their admittance to the hospital. Of the group 88 per cent were able to ambulate on an average of one month later; of these, 51 per cent needed no supportive aids of any kind. Inability to walk was linked in every case with lack of mental recovery, although the lack was also observed in some who learned to ambulate. There were no instances of a second cerebrovascular accident while undergoing the program, nor were there any cases of hypostatic pneumonia or phlebitis.

HEART DISEASE--MEDICAL TREATMENT (continued)

See also 545.

HEART DISEASE (CONGENITAL)

529. Ross Laboratories (Columbus 16, Ohio)

Congenital heart disease; report of the fourteenth Ross Pediatric Research Conference. Columbus, Ohio, The Laboratories, c1955. 118 p. figures, tabs.

The Conference transcript, edited by the Medical Department of the Laboratories and prepared by Dr. F. W. Heggeness, covers the latest research information, to 1954, on congenital heart disease. Discussed were the experimental production of cardiovascular anomalies, the natural history of many of the disorders, diagnosis, and therapy. The role of some of the newer laboratory procedures was evaluated and the surgical approach to correction of some of the defects discussed.

530. Shapiro, Morse J. (Pediatrics Cardiac Clinic, Cedars of Lebanon Hosp., 4833 Fountain Avenue, Los Angeles 29, Calif.)

Congenital heart disease; 1. Clinical diagnosis, by Morris J. Shapiro; 2. Surgical treatment, by Arthur DeBoer. Modern Med. Mar. 15, 1956. 24:6:71-87.

Discusses briefly the common types of congenital heart defect and their differential diagnosis, new ideas resulting from recent research, and present day concepts of the surgical treatment of congenital heart lesions.

HEMIPLEGIA

See 555; 556.

HEREDITY

531. Manchester, P. Thomas, Jr. (478 Peachtree St., N. E., Atlanta 3, Ga.)

Advising patients with hereditary eye disease. Am. J. Ophthalmology. Sept., 1955. 40:3:412-417. Reprint.

Information on dominant, recessive, and sex-linked traits which can cause eye disease is given and the possibilities of inheritance are considered. A classification of the important hereditary eye diseases is offered.

HOSPITAL SCHOOLS--TEXAS

532. Jurecka, L. F. (Southwest Texas State Teachers Coll., San Marcos, Tex.)

At Gonzales school goes on for hospitalized children. Texas Outlook. Mar., 1956. 40:3:14-15, 31.

The Gonzales Independent School District has maintained for the past ten years a public school unit at Gonzales Warm Springs Foundation. Administration of the program is described.

HOSPITALS

See 501; 548; 566.

JUVENILE DELINQUENCY

533. U. S. Children's Bureau (Washington 25, D. C.)

Health services and juvenile delinquency; a report on a conference on the role of health services in preventing dissocial behavior. Washington, D. C., The Bureau, 1955. 54 p. (Children's Bur. publ. no. 353-1955)

A report of a conference of health personnel on the ways in which health services could contribute to the prevention and treatment of dissocial behavior. Considered were the work of the physician in private practice, the staff of public health departments, school health workers, public health nurses, medical social workers, nutritionists, and others with similar interests. Contributions of mental health specialists and welfare workers were not discussed. Various types of preventive programs for the healthy development of children and young people, maternal and child health services, and especially, the means of preventing deprivation of maternal care for infants were discussed.

KNEE

534. De Palma, Anthony F. (248 S. 21st St., Philadelphia 3, Pa.)

Lesions of the knee in childhood. Pediatric Clinics N. Am. Nov., 1955. 2:4:1035-1052. Reprint.

Some of the more common deformities and osteochondropathies of the knee, their etiology, pathogenesis, clinical features and treatment, are discussed.

MENTAL DEFECTIVES--BIBLIOGRAPHY

535. Harnett, Mary E.

Mental retardation; a special bibliography. Washington, D. C., Internatl. Council for Exceptional Children, c1956. 17 p.

A bibliography of books, periodical articles, and pamphlets on various aspects of mental retardation; subjects cover parent-child relations, special education and classroom procedures, supplementary services, vocational and medical aspects, psychological research studies, and general references to program administration, guiding and counseling, institutional care, legislation, teacher preparation, and community and public education. Entries are not annotated.

Available from the International Council for Exceptional Children, 1201 Sixteenth St., N. W., Washington 6, D. C., at 35¢ a copy (discounts for quantity orders).

MENTAL DEFECTIVES--INSTITUTIONS

536. Who should pay for the care of mentally retarded persons in institutions?

Welfare Reporter, N. J. Dept. Institutions and Agencies. Dec., 1955. 7:8:7-8.

At a recent New Jersey Welfare Council conference, the question of who should pay the costs of custodial care of the mentally retarded in State institutions was discussed. The haphazard system of assessing costs and the lack of uniform procedure in the state were criticized. Questions were posed concerning the parents' responsibility for payment, state responsibility, the development of equitable plans for payment, and the legal basis for fees.

MENTAL DEFECTIVES--PSYCHOLOGICAL TESTS

537. Horan, Edmund M. (529 W. 111th Street, New York 25, N. Y.)

Word association frequency tables of mentally retarded children.

J. Consulting Psych. Feb., 1954. 20:1:22.

Oral responses of 732 mentally retarded children (a total of 73,000 responses) are reported in this study. Frequency tables, based on the Kent-Rosanoff stimulus set of 100 words, have been arranged by chronological age, 9 through 14; IQ's ranged from 40 to 75. The investigation found a much closer similarity between children's associations and those of adults than did previous studies. Differences were found in the tendency of children to offer a greater number of unique responses, to use more different words in response to a stimulus, and, at times, to be unable to respond to the stimulus word. Word meanings do not play as important a part in the formation of associations as was thought. Comparison of responses of each age group of retarded children demonstrates a uniform decrease in the number of failures of response and unique response, with a concurrent increase in the number of common responses.

An extended report of the study may be obtained from the author.

MENTAL DEFECTIVES--SPECIAL EDUCATION

538. Birch, Jack W.

Reaching the mentally retarded, by Jack W. Birch and Godfrey D. Stevens. Bloomington, Ill., Public Schools Publ. Co., c1955. 44 p. tabs. (Teaching exceptional children in every classroom ser.)

One of a series of four booklets prepared to help the regular classroom teacher apply methods used by specialists in teaching exceptional children. In this particular one, the teacher is given some understanding of the mentally handicapped and their problems. Specific suggestions are made to aid in working with the mentally handicapped in the regular classroom. Contains also a section on working with parents.

Available from Public Schools Publ. Co., 204 W. Mulberry Street, Bloomington, Ill., at \$1.00 a copy. (See also #522, #563, and #588.)

539. Reininger, Ruth E. (Hamilton Township Schools, Mercer Co., N. J.)

A curriculum for the educable mentally retarded preadolescent.

Elementary School J. Mar., 1956. 56:7:310-314.

Defines the educable preadolescent mentally retarded child and discusses characteristics of the group, educational objectives, facilities needed, and a suitable curriculum and teaching methods.

See also 510; 514.

MENTAL DISEASE--MEDICAL TREATMENT

540. Blassingille, B. (209 Walnut Avenue, Roxbury 19, Mass.)

Rehabilitation of negro post-leukotomy patients. J. Nerv. and Mental Disease. June, 1955. 121:6:527-534. Reprint.

"A review of a rehabilitation program for leukotomized Negro patients was presented, critically evaluated, and compared with similar programs published in the literature, and future studies and changes in the program indicated . . . There is need for a critical evaluation of the high incidence of convulsive seizures in this as well as in other series reported by various authors . . . The cultural, social, and economic

MENTAL DISEASE--MEDICAL TREATMENT (continued)

factors peculiar to the southern Negro have not been singularly significant in their rehabilitation."--Summary and Conclusions.

MENTAL DISEASE--SPEECH CORRECTION

541. Wilcox, D. E. (1410 Maria Lane, Walnut Creek, Calif.)

Observations of speech disturbances in childhood schizophrenia.
Diseases Nerv. System. Jan., 1956. 17:1:2-23. Reprint.

A paper describing speech abnormalities observed in schizophrenic children and attempts to correlate these with parental acts and attitudes seen in the concomitant psychotherapy of these children and their parents. It is especially concerned with defensive aspects of the speech of these children. Three case histories are included.

MENTAL HYGIENE

See 501; 502.

MULTIPLE HANDICAPS

See 510.

MULTIPLE SCLEROSIS

See 596.

MUSCULAR DYSTROPHY

542. Jervis, George A. (Letchworth Village, Thiells, N. Y.)

Progressive muscular dystrophy with extensive demyelination of the brain. J. Neuropathology and Experimental Neurology. Oct., 1955. 14:4:376-386. Reprint.

"Clinical, pathologic, and genetic data are presented of a closely inbred kindred, 5 members of which, 2 males and 3 females, exhibited clinical manifestations characteristic of the 'childhood type' of progressive muscular dystrophy. In at least 2 affected members the muscular symptomatology was complicated by the development of mental deterioration, epilepsy, and progressive spasticity. Pathologic study of one affected member disclosed the presence of a chronic extensive demyelinating process involving the cerebral hemisphere. Various aspects of these findings are briefly discussed. Two possible interpretations are suggested: either an extraordinary association in the same individuals of muscular dystrophy and brain diffuse sclerosis or the presence of a still unrecognized clinicopathologic syndrome."--Summary.

MUSIC

543. Korhonen, Gloria V. (Franklin Elementary School, Detroit, Michigan)

Music as an educational value for the blind. New Outlook for the Blind. Mar., 1956. 50:3:91-94.

Music as a source of enjoyment and as therapy for the release of energy and tension offers valuable activity for the blind child. Five general activity areas in music and their educational value for the blind are discussed.

MUSIC THERAPY

See 565.

NERVE INJURIES

544. Hines, H. M. (Iowa State Univ. College of Med., Iowa City, Iowa)

Changes in muscle and nerve following motor neuron denervation, by H. M. Hines and J. D. Thomson. Am. J. Phys. Med. Feb., 1956. 35:1:35-57.

A special review article presenting a summary of some of the facts and theories relative to the reactions of skeletal muscle to motor denervation, together with certain aspects of reinnervation and regeneration. 112 references.

NURSERY SCHOOLS

See 500.

NURSING

See 504.

NUTRITION

545. Keys, Ancel (Univ. of Minnesota, Minneapolis, Minn.)

Coronary heart disease and the mode of life. Mod. Concepts Cardiovascular Disease. Mar., 1956. 25:3:317-320.

Research on the relationship of diet, especially the fat content of diet, to coronary disease is discussed in a comparison of the experience in various countries. It appears that diet is far more important in the control of heart disease than is physical activity.

546. Stitt, Pauline G. (55 Shattuck St., Boston 15, Mass.)

Nutrition services for crippled children, by Pauline G. Stitt and Bertha S. Burke. Children. Mar.-Apr., 1956. 3:2:55-60.

Nutrition services may offer tangible benefits not only to the child with a crippling condition but to the family as well, in terms of physical protection, budget easement, and mental hygiene. Nutrition is important in both primary and secondary prevention of crippling. Some of the nutrition problems of various conditions are discussed, as well as the role of the nutritionist on the treatment team of crippled children's services.

OLD AGE--NEW JERSEY

547. Public Health News, N. J. State Dept. of Health. Feb., 1956. 37:2.

Title of issue: Health aspects of aging.

Contents: Aging; implications for public health, Clark Tibbitts. -New Jersey program for the prevention of chronic illness, Donald Bergsma. -Health maintenance in the physician's office, Vincent P. Butler. -New trends in medical services for the aged, Michael M. Dasco. -Elderly patients in New Jersey hospitals, J. Harold Johnston. -Findings of the chronic illness survey in Hunterdon County, Pauline R. Goger. -A demonstration in rehabilitation of the chronically ill aged, Ellis L. Smith. -Public and private facilities for long-term care, F. Spencer Smith. -New Jersey's experience with tax-supported medical care for the aged, Theodore R. Isenstadt. -Housing the aged; implications for health, Ollie A. Randall. -A local health officer looks at housing, Aaron H. Haskin. -Nursing care for the aged at home, Eleanor P. Duffy. -Mental hygiene of aging, Paul V. Lemkau. -Experience of Montefiore Hospital with a home care program, Martin Cherkasky. (See also #503.)

OLD AGE--MEDICAL TREATMENT

548. Gitman, Leo (Brooklyn Hebrew Home and Hosp. for the Aged, Howard & Dumont Aves., Brooklyn 12, N. Y.)

Blueprint for a geriatric center. Geriatrics. Oct., 1955. 10:10:487-490. Reprint.

" . . . Outlines the functions of a geriatric hospital center in a medical care program for the aged, and describes its integration with existing community services. The basic goal of such a center is to keep the aging person functioning in the community as long as possible." Discussed are the role of the center, medical aims, organization, and research and educational aspects of the geriatric unit.

See also 575.

ORTHOPEDICS

549. Goff, Charles Weer (30 Farmington Avenue, Hartford, Conn.)

Orthopedic examination of the growing child. Pediatric Clinics N. Am. Nov., 1955. 2:4:929-950. Reprint.

Dynamics of growth, their fluctuations, their correlations as to sex and orthopedic disorders, as influenced by heredity, environment, trauma, and the endocrines, are discussed. Techniques of the orthopedic examination are shown as overlapping those of the pediatric examination. Orthopedic signs of a variety of physical disorders of children are covered briefly. The author points out the need for early diagnosis of disorders, especially that of cerebral palsy since it is responsible for as large a number of handicapped persons as any other single disorder except poliomyelitis.

See also 488; 587.

OSTEOMYELITIS

550. Green, Morris (333 Cedar St., New Haven 11, Conn.)

Acute hematogenous osteomyelitis, by Morris Green, William L. Nyhan, Jr., and Mildred D. Fousek. Pediatrics. Mar., 1956. 17:3:368-382.

Clinical records of 99 infants and children admitted to the Grace-New Haven Community Hospital with acute hematogenous osteomyelitis are reviewed. Also discussed are the presenting symptomatology and physical findings of the group. Diagnoses at the time of admission and the differential diagnosis are reviewed, with a detailed program for medical therapy presented. Indications for surgery are considered. The authors stress the necessity for intensive treatment over a considerable period of time.

PARALYSIS AGITANS--PHYSICAL THERAPY

See 520.

PARAPLEGIA--BIOGRAPHY

551. Barnes, Ann

Birthday cake for Bruce. Crippled Child. Feb., 1956. 33:5:13-15, 23.

Mrs. Barnes who suffered a broken neck and the resulting extensive paralysis tells of her rehabilitation from the initial days in the hospital, through training in a rehabilitation center, to her return home. The ad-

PARAPLEGIA--BIOGRAPHY (continued)

justments to living in a wheelchair were many but with the help of her family and friends and the use of mechanical aids, she is making the transition from hospital to home successfully.

PARAPLEGIA--MEDICAL TREATMENT

See 512.

PARENT EDUCATION

552. Kawin, Ethel (1545 E. 60th Street, Apt. 710, Chicago 37, Ill.)

An experiment to promote discussions of parenthood in a free nation. Children. Mar.-Apr., 1956. 3:2:66-71.

Aided by a two year grant from the Fund for Adult Education, the University of Chicago's Parent Education Project, based on a program outline by the author of this article, is designed to help parents acquire the philosophy of parenthood. The program includes a basic course and five supplementary courses adapted to various periods of child development. Materials and methods developed have been evaluated in approximately 100 groups in 18 states and 2 Canadian provinces. Permanence of the program depends, eventually, on its support by local communities. Findings on the effectiveness of the study-discussion groups, as reported by group leaders and parents, are discussed.

553. Pollak, Gertrude K. (Family Service of Philadelphia, Philadelphia, Pa.)

Principles of positive parent-child relationships in family life education. Social Casework. Mar., 1956. 37:3:131-138. Reprint.

In the group setting of family life education programs, specific questions asked by parents are discussed and used to develop principles of positive parent-child relationships which have meaning for the particular group. A number of principles useful for parents in dealing more constructively with their children have been identified. The role of the group leader, methods she employs to relieve parents' anxieties, to provide emotional experiences of being accepted and understood, and to offer parents an opportunity to learn new ways of handling their problems are discussed.

PHYSICAL EFFICIENCY

554. Zankel, Harry T. (Crile V. A. Hosp., 7300 York Rd., Cleveland 30, Ohio)

The physical fitness index in diabetic patients; a preliminary report, by Harry T. Zankel (and others). J. Assn. Phys. and Mental Rehab. Jan.-Feb., 1956. 10:1:14-16.

A preliminary report of the effect of an organized program of exercise and activity upon the Physical Fitness Index of 30 diabetic patients, studied for 18 months. Findings revealed that regular exercise and activity, associated with correct diet and insulin, appeared to raise the PFI of these patients.

PHYSICAL THERAPY

555. Lyttleton, Phyllis

A visit to the United States. Physiotherapy. Jan., Feb., 1956. 42:1 & 2. 2 pts.

PHYSICAL THERAPY (continued)

An English visitor on a Fulbright Travel Grant gives her impressions of rehabilitation efforts in the United States, especially in the treatment of hemiplegics and elderly patients. She was especially aware of the divergence of facilities and practices in various parts of the country. She discusses the value of the team approach and compares training standards in the United States and Great Britain, deviations in physical therapy methods, and types of equipment used in this country.

556. Shriber, William J. (300 Brookline Ave., Boston 15, Mass.)

Rehabilitation of hemiplegic and arthritic patients with physical therapy. Med. Clinics N. Am. Sept., 1955. 39:5:1493-1501. Reprint.

Good physical therapy, aimed at the prevention or correction of deformities and the maintenance of function, may be instituted at the onset of hemiplegia and arthritis. Principles related to physical therapy in the treatment of hemiplegia, rheumatoid arthritis and osteoarthritis are discussed.

PHYSICAL THERAPY--PERSONNEL

See 586.

POLIOMYELITIS

See 597.

POLIOMYELITIS--PHYSICAL THERAPY

557. Kettlewell, B.

The unique effect of fatigue in poliomyelitis. Physiotherapy. Feb., 1956. 42:2:45-50.

An examination of the effects of physical activity and its resultant fatigue in the different phases of poliomyelitis. Immediately before infection the fatigue factor appears to have no effect, but a disastrous effect in the preparalytic stage. In the chronic stages it has, so the author states, an extremely important beneficial effect which is not usually fully exploited; he sees possibilities in developing the power of hypertrophy. The effect of early weight bearing with and without calipers is illustrated by case histories.

POLIOMYELITIS--PREVENTION

558. Cochran, Kenneth W. (Univ. of Michigan School of Public Health, Ann Arbor, Michigan)

Experimental chemoprophylaxis in poliomyelitis. Univ. of Mich. Med. Bul. June, 1955. 21:6:165-169. Reprint.

A discussion of some special aspects of viruses in general and poliomyelitis virus in particular. Laboratory experiments conducted in the Virus Laboratory of the University of Michigan School of Public Health, to discover ways of controlling the disease by chemical means, are discussed. Results such as those referred to here indicate that antiviral substances can be obtained although the agents discussed are not yet at the clinical level of usefulness and may never be more than tools of research.

POSTURE

559. Kottke, Frederic J. (Dept. of Phys. Med. and Rehab., Univ. of Minn. Med. School, Minneapolis 14, Minn.)

Relationship of the tilt of the pelvis to stable posture, by Frederic J. Kottke and William G. Kubicek. Arch. Phys. Med. and Rehab. Feb., 1956. 37:2:81-90. Reprint.

In same issue: Evaluation of extension of the hip, Martin O. Mundale (and others), p. 75-80.

A consideration of the influence of the tilt of the pelvis on stance and balance in the sagittal plane during standing and walking. In order to evaluate the influence of hip extension and pelvic tilt on stable posture, there is need for an accurate method of measuring hip extension; several are compared for their usefulness. Problems presented by abnormal, hemiplegic, and paraplegic posture and walking are discussed and illustrated.

The second article presents a simple method of measurement of motion occurring in the hip and an evaluation of the accuracy and reproducibility of the method.

PREMATURE BIRTH

560. Ross Laboratories (Columbus 16, Ohio)

Respiratory problems in the premature infant; report of the fifteenth Ross Pediatric Research Conference. Columbus, Ohio, The Laboratories, c1955. 87 p. figures.

A report of a symposium on the problems of respiration in premature infants. Significance of the problem is emphasized by an analysis of the morbidity and mortality rates of the premature. Physiologic and pathologic factors affecting the infant, the role of the mother, the placenta and the fetus, clinical problems, and their management are discussed. A brief discussion of nursery techniques in care of the premature infant is included.

PSYCHOLOGICAL TESTS

561. Layman, Emma M. (Children's Hosp., 2125 13th Street, N. W., Washington 9, D. C.)

Psychological testing of infants and preschool children. Clin. Proc., Children's Hosp., Washington. June, 1955. 11:6:126-136. Reprint.

The value of developmental testing of infants and types of tests suitable for psychological evaluation of preschool children are described. Includes a case history illustrating the use of a variety of tests for evaluating possible brain damage and use of the findings to the pediatrician counseling the mother of the child.

PUBLIC ASSISTANCE

562. U. S. Office of Vocational Rehabilitation (Washington 25, D. C.)

Working together to rehabilitate the needy disabled; prepared for state public assistance and vocational rehabilitation programs. Washington, D. C., The Office, 1955. 26 p.

A booklet considering the relationship between state public assistance and vocational rehabilitation agencies, how they may cooperate to make their programs more effective, and help the disabled to become self-dependent. Discussed are the basis for cooperation, common objectives, and administrative details of cooperative program development.

READING

563. Birch, Jack W.

Retrieving the retarded reader; with special emphasis on remedial teaching of vocabulary; rev. ed. Bloomington, Ill., Public Schools Publ. Co., c1955. 32 p. tabs. (Teaching exceptional children in every classroom ser.)

Since every teacher of a regular classroom will be faced with the problem of retarded readers, this booklet offers practical solutions for the problems presented. The suggestions and directions for remedial teaching have been found feasible; ways of enlisting the aid of parents in a remedial reading program are also suggested.

Available from Public Schools Publ. Co., 204 W. Mulberry Street, Bloomington, Ill., at \$1.00 a copy.

REHABILITATION

564. American Association of Medical Social Workers (1700 Eye Street, N. W., Washington 6, D. C.)

The evolving concept of rehabilitation. Washington, D. C., The Assn., 1955. 37 p. (Social work practice in medical care and rehabilitation settings, Monograph I)

Contents: New horizons in rehabilitation, Cecile Hillyer. -Rehabilitation as a concept in the utilization of human resources, Frederick A. Whitehouse.

The content of this monograph and others of the series which will be released in 1955 (see #567) and 1956 is derived from papers and related material developed for a training course for leaders of regional institutes on medical social work. This particular monograph establishes a frame of reference for monographs which follow; the total series is descriptive of the specialized nature of social work practice in the rehabilitation setting.

565. Hosp. Management. Apr., 1956. 81:4.

Partial contents: The advantages of disadvantage, Howard A. Rusk, p. 37-38, 86. -The rehabilitation of crippled children, Jayne Shover, p. 39-41, 113-114. -Eliminate neck chafing in the respirator patient, John A. Reinertsen, p. 42-43, 74. -Rehabilitation services in Chicago hospitals, Ben L. Boynton and Joseph A. Chivers, p. 44-45, 127-128. -Music therapy in rehabilitation, Esther Goetz Gilliland, p. 46-48, 98-99. -An administrator becomes a patient, Crayton E. Mann, p. 49-50. -Rehabilitation equipment, Orpha D. Mohr, p. 108, 110, 112.

See also 572; 580.

REHABILITATION--NEW YORK

566. New York Society of Physical Medicine

Hospital care of the orthopedically handicapped child; a symposium . . . May 5, 1954. N. Y. State J. Med. Oct. 15, 1955. 55:20:2921-2937. Reprint.

Contents: Background, pediatric and general aspects, Helen M. Wallace. -Orthopedic aspects, Robert S. Siffert. -Physical medicine and rehabilitation aspects, Jerome S. Tobis. -Nursing care, Margaret A. Losty. -Medical social work aspects, Helen M. Gosset.

REHABILITATION--PERSONNEL

567. American Association of Medical Social Workers (1700 Eye Street, N. W., Washington 6, D. C.)

Teamwork; philosophy and principles. Washington, D. C., The Assn., 1955. 29 p. (Social work practice in medical care and rehabilitation settings, Monograph II)

Contents: Teamwork; philosophy and principles, Frederick A. Whitehouse. -A staff study of collaborative effort; principles of collaboration, Miriam G. Collier.

Dr. Whitehouse's article stresses the general principles and ideas set forth in the first monograph of the series and describes means by which the goals and objectives of rehabilitation may be achieved; he believes that future treatment of human beings will be done through a series of interconnected teams at various community and clinic levels.

The article by Miriam G. Collier reports on a social service project in a Veterans Administration hospital which undertook the study of the nature and requirements of the collaborative process. Guiding principles underlying the process are identified. (See also #564.)

568. Fowler, John R.

The role of the general practitioner in recognizing crippling conditions. Chicago, Natl. Soc. for Crippled Children and Adults (1956). 6 p. Multilithed.

Address by . . . president, American Academy of General Practice, at the convention of the Natl. Soc. for Crippled Children and Adults, Nov. 29, 1955.

Dr. Fowler suggests ways for enlisting the general physician's knowledge and skills in the aid of those with crippling conditions. Through closer liaison and better understanding between the physician and agencies working in behalf of the disabled and closer integration of all specialties, better programs for care and treatment of the patient will result.

Available from the Library, National Society for Crippled Children and Adults, 11 S. LaSalle Street, Chicago 3, Ill. Single copies free.

REHABILITATION--PROGRAMS

569. Shands, A. R., Jr. (Nemours Foundation, Alfred I. duPont Institute, Wilmington 99, Del.)

A few remarks on services for crippled children. Va. Med. Monthly. Sept., 1955. 82:381-384. Reprint.

In this address delivered at the dedication of the Vose Memorial Chapel-Auditorium, Crippled Children's Hospital, Richmond, Va., Dr. Shands stresses the value of volunteers, essential steps in establishing facilities in a state program for crippled children, the shortage of professional personnel, the changing pattern of crippling as seen in orthopedic hospitals, and weaknesses in present programs.

570. Stone, Mario M. (17 No. 260, Esq. A 1, Vedada, Havana, Cuba)

La rehabilitacion del nino impedido desde el punto de vista orthopedico. Revista de Servicio Social. May-Aug., 1955. 7:2 & 3. (7) p. Reprint.

A discussion of the treatment of orthopedically handicapped children, especially those with cerebral palsy. Frequency and incidence of orthopedic handicaps and accompanying mental deficiency in Cuba are mentioned briefly.

REHABILITATION--PROGRAMS (continued)

571. Susca, Louis A. (N. Y. Med. Coll., Flower and Fifth Avenue Hospital, New York, New York)

Pediatric rehabilitation; with special emphasis on factors involved in the realistic management of the child with cerebral palsy. Arch. Pediatrics. June, 1955. 72:6:171-181. Reprint.

Etiology and incidence of cerebral palsy, the various problems arising from the neurological condition, objectives of pediatric rehabilitation programs in cerebral palsy, and the role of the pediatrician in the program are considered.

REHABILITATION CENTERS--DESIGNS AND PLANS

572. Cronin, John W.

Planning multiple disability rehabilitation facilities. Hospitals. Mar. 16, 1956. 30:6:47-54, 60.

In same issue: Guest editorial; Rehabilitation, by Mary E. Switzer, p. 35. -New opportunities for planning health facilities, Leonard A. Scheele, p. 36-38, 124. -Rehabilitation; a doctor's viewpoint, by H. Worley Kendell, p. 39-43, 124. -Rehabilitation; a patient's viewpoint, by Crayton E. Mann, p. 44-46. -What rehabilitation facilities are needed?, by Robert L. Rogers, p. 55-57.

Articles dealing with the role of the hospital in rehabilitation programs.

RUBELLA

573. Rauh, Louise W. (Dept. of Pediatrics, Univ. of Cincinnati Coll. of Med., Cincinnati, Ohio)

Rubella and pregnancy; a pediatric review. Ohio State Med. J. Sept., 1955. 51:9:875-877. Reprint.

An explanation of the rubella syndrome, incidence of occurrence following rubella in the first four months of pregnancy, the effect of gamma globulin in the prevention of rubella, active immunization and therapeutic abortion.

SCLEROSIS

574. O'Doherty, Desmond (Georgetown Univ. Hosp., 3800 Reservoir Rd., N. W., Washington 7, D. C.)

Diseases simulating amyotrophic lateral sclerosis. Bul., Georgetown Univ. Med. Center. Sept., 1955. 9:1:17-20. Reprint.

"A group of conditions is presented which may at times be confused with ALS. In view of the lack of treatment in ALS, and the possibility of surgical or medical Rx in these conditions, it is important to consider these diseases in the differential diagnosis of ALS. The mechanism by which space taking lesions of the cervical cord produce upper and lower motor neuron signs is shown."--Summary.

SHELTERED WORKSHOPS

575. Boyle, Robert W. (Marquette Univ. School of Med., 561 N. 15th St., Milwaukee 3, Wis.)

A sheltered workshop program in a geriatric hospital, by Robert W. Boyle, Louis Schwartz, and Edna L. Prosser. Geriatrics. Sept., 1955. 10:9:436-439. Reprint.

SHELTERED WORKSHOPS (continued)

Describes the administration of a sheltered workshop program carried out at the Veterans Administration Hospital at Ft. Thomas, Kentucky, for chronic patients, who, for various reasons, will never be able to leave institutional life. Physical medicine and rehabilitation services can discover skills and encourage productivity in geriatric patients.

SHELTERED WORKSHOPS--ADMINISTRATION

576. New York. Sheltered Workshop for the Disabled, Binghamton (Binghamton, N. Y.)

Starting a workshop. Binghamton, The Workshop (1956). 38 p. Mimeo. \$1.00.

A manual written to aid communities interested in setting up a sheltered workshop, it describes the purposes, organization and operation of the plant. Discussed are: surveying the handicapped, basic organization, the board of directors, sources for financing, building requirements, equipment, safety measures, orientation and training of new employees, and contract work. Experiences of the Binghamton Sheltered Workshop form the basis of the manual.

A booklet of sample forms is also available from the Binghamton Workshop at \$1.00 a copy.

SOCIAL SERVICE (MEDICAL)

577. Steinberg, Martin R. (Mt. Sinai Hosp., 5th Ave. & 100th Street, New York 29, New York)

Medical social service, necessity or luxury?, by Martin R. Steinberg and Doris Siegel. Hospitals. Mar. 1, 1956. 30:5:46, 48, 50.

Through examination of a substantial number of case records of patients who had received social casework, four types of services provided by social casework which enabled patients to begin, continue, or receive more effective medical treatment were revealed. In the authors' opinions social service should receive high priority among hospital services.

See also 564; 567.

SPECIAL EDUCATION

578. Lee, John J. (College of Education, Wayne Univ., Detroit, Mich.)

Today in special education. Crippled Child. Feb., 1956. 33:5:18-19, 28-29.

Some background information on the history of special education and the current trends in care and education for the handicapped.

SPECIAL EDUCATION--STUDY UNITS AND COURSES

See 598.

SPEECH CORRECTION

579. Frangioni, Irene H. (50 N. Broadway, White Plains, N. Y.)

It's always speech time. N. Y. State Education. Mar., 1956. 43:6:393-395.

Ways in which the elementary teacher can develop speech situations in the classroom are suggested. The writer, a speech correctionist,

SPEECH CORRECTION (continued)

believes that the teacher can give children special help even when she has had no training in speech correction; devices for teaching better speech and the teacher's role in a speech correction program are discussed.

See also 599.

SURGERY

580. Beck, William C. (Guthrie Clinic, Sayre, Pa.)

Postoperative convalescence. Guthrie Clinic Bul. Oct., 1955. 25:2:69-75. Reprint.

Diversity of opinions of surgeons on the period of disability permitted after various operations prompted the author to analyze problems of the healing period and during rehabilitation of the patient. The nature of the stresses on healing surgical wounds of various types is discussed, as well as the influence of disease states for which surgery was performed. Psychological aspects of the convalescent stage influence the patient's attitude toward return to work. A sample form for rehabilitation prescription is included and exercises to be prescribed after various types of surgery are outlined.

TUBERCULOSIS--DIAGNOSIS

581. National Tuberculosis Association

Diagnostic standards and classification of tuberculosis. New York, The Assn., 1955. 79 p. diagrams. (1955 edition)

This tenth edition of a widely accepted authority on the terminology, standard tests, and classification of tuberculosis, brings to physicians up-to-date summaries of current views on the pathogenesis of the disease and its clinical implications and descriptions of accepted procedures in the roentgenographic delineation of tuberculous lesions. Laboratory methods used in the diagnosis of lesions are described. An important portion of the booklet deals with the clinical classification of pulmonary tuberculosis; within its limitations, the classification can, with appropriate changes, be adjusted to extra-pulmonary tuberculosis. Most of the chapters of previous editions have been revised to some extent; some have been entirely rewritten.

Available from local chapters of the National Tuberculosis Association.

TUBERCULOSIS--MEDICAL TREATMENT

582. Bosworth, David M. (742 Park Avenue, New York 21, New York)

Bone and joint tuberculosis in childhood; recent advances in diagnosis and treatment. Pediatric Clinics N. Am. Nov., 1955. 2:4:1129-1136. Reprint.

Factors in diagnosing bone and joint tuberculosis in children, the essential need for biopsy in correct diagnosis, caution in the use of new antituberculous drugs, medical and surgical treatment of the condition are covered.

TUBERCULOSIS--PHYSICAL THERAPY

583. Young, W. W. (VA Hosp., Butler, Pa.)

An assignment, by W. W. Young and Edwin B. Augustin. Arch. Phys. Med. and Rehab. Feb., 1956. 37:2:96-99.

TUBERCULOSIS--PHYSICAL THERAPY (continued)

Describes experiences at the Veterans Administration Hospital, Butler, Pa., where a rehabilitation ward was established in May, 1953. Objectives of the program included the acquisition by patients of an activity tolerance equivalent to an 8-hour-day work tolerance at time of discharge. The role of the physical therapy department in the program is described. Medical aspects of the program will be discussed in a future report.

VOCATIONAL GUIDANCE

584. Miller, Maurine R. (503 W. 46th Street, Indianapolis 8, Ind.)

Measuring the job potential of the disabled, by Maurine R. Miller and Freeman D. Ketron. J. Rehabilitation. Nov.-Dec., 1955. 21:6:10-11, 14-15.

Describes a "work exploratory plan," a cooperative effort of the Indianapolis Goodwill Industries and the Indiana Vocational Rehabilitation Division to solve the problems of those seemingly unemployable because nothing is known concerning what they might be able to do on the job. The program, still in the experimental stages, has already demonstrated its usefulness as a rehabilitation technique.

VOLUNTEER WORKERS

585. Bader, Charles (Veterans Administration Center, Togus, Maine)

The role of the volunteer worker in corrective therapy. J. Assn. Phys. and Mental Rehab. Jan.-Feb., 1956. 10:1:12-13, 17.

Discusses the role of the volunteer in a corrective therapy program and the necessary prerequisites for a good volunteer worker in such a program. The use of volunteers has enabled the therapist to treat additional patients, released him for more time with individual patients who require more intensive therapy, and allowed more intensive coverage of all patients.

586. Scruggs, Ozella L. (V. A. Hosp., Oklahoma City, Okla.)

Use of volunteer workers in a physical therapy section. Phys. Therapy Rev. Mar., 1956. 36:3:179-181.

Volunteers, selected and oriented through the joint efforts of Special Services and the physical therapy Section of the V.A. Hospital, Oklahoma City, Okla., are trained to make devices for patient use in the hospital and after discharge. Self-care evaluation tests are administered by volunteers under supervision of the chief physical therapists, and their services have been used in the housekeeping department, escort service, in the office, and in washing and rolling bandages. They add greatly to efficient operation of the physical therapy department.

WALKING

587. Wilson, John C., Jr. (2010 Wilshire Blvd., Los Angeles 57, Calif.)

Childhood limp; diagnosis and treatment. Pediatric Clinics N. Am. Nov., 1955. 2:4:1021-1033. Reprint.

A review of the many factors and diseases producing limp in childhood, their diagnosis and treatment. Impairment of gait, whether due to bony abnormality, muscular weakness, or primary neuropathy, always

WALKING (continued)

manifests itself in variation of gait; the importance of limp as a cardinal sign of disease of the skeleton and its associated structures has been stressed. An early correct diagnosis and evaluation of the progress of the disease can be arrived at only through careful and repeated observation of the lame child.

WRITING

588. Cole, Louella

Handwriting for left-handed children; grades 1-6. Bloomington, Ill., Public Schools Publ. Co., c1955. 17 p. illus. (Teaching exceptional children in every classroom ser.)

A short, clear, practical explanation of the fundamental problems and procedures of left-handed writing, emphasizing legible script produced with speed and comfort, and based on the theory of allowing the child freedom to use the left hand. Discussed are difficulties the left handed child faces, common maladjustments in writing positions, correct procedures for teaching penmanship, and a proposed plan for the development of basic habits.

Available from Public Schools Publ. Co., 204 W. Mulberry St., Bloomington, Ill., at \$1.00 a copy.

New Books Briefly Noted

BLIND--PARENT EDUCATION

589. Lowenfeld, Berthold

Our blind children; growing and learning with them. Springfield, Ill., Charles C. Thomas, Publ., c1956. 205 p. illus. \$5.50.

Written mainly for parents, Dr. Lowenfeld's latest contribution to understanding of the needs of blind children offers much that will be helpful to social workers, teachers and those who counsel parents or direct educational programs. Practical advice on parent attitudes and the training of blind children is found in every chapter; also discussed are educational placement, the child in various stages of his education, a variety of educational facilities, special methods, and their psychological foundations. A question-and-answer section deals with many of the problems for which parents seek solutions. A bibliography and list of resources serving the needs of the blind are included.

BRAIN INJURIES

590. Rogers, Martha E.

Prenatal and paranatal factors in the development of childhood behavior disorders, by Martha E. Rogers, Abraham M. Lilienfeld, and Benjamin Pasamanick. Baltimore, Md., Johns Hopkins Univ. (1956?) 157 p. tabs. Paperbound.

A report of a study of the association between various factors of pregnancy and parturition and selected behavior disorders of childhood. Factors thought to be associated with cerebral damage and the possibility of their occurrence during the intra-uterine and neonatal stages of development are discussed in the introduction. Study of a group of behavior problem cases and a group of non-behavior problem controls, with an analysis of the prenatal and birth histories of selected cases from both groups, revealed that abnormalities of the prenatal and paranatal periods

BRAIN INJURIES (continued)

were significantly associated with behavior disorders.

Parts of this study have been previously reported in articles annotated in the Bulletin on Current Literature (see issues for Dec., 1951, #973; Aug., 1954, #816; July, 1955, #673; Mar., 1956, #307; and Apr., 1956, #450). See also #491 in this issue.

CEREBRAL PALSY

591. Cardwell, Viola E.

Cerebral palsy; advances in understanding and care. New York, Assn. for the Aid of Crippled Children, c1956. 625 p. illus.

The author's first book, "The Cerebral Palsied Child and His Care in the Home," published in 1947 by the Association, reviewed current knowledge and experience as reflected in the published literature. This second book not only reports literature that has appeared since 1947 but seeks to integrate the opinions of experts in all disciplines concerned with cerebral palsy, thus affording a comprehensive view of the medical, social, and educational aspects. Although the book may be regarded as a basic text for professional students and workers specializing in cerebral palsy, teachers, parents, and interested lay persons will find the book helpful in that it provides a sound basis for treatment and the planning of community programs for the care of the cerebral palsied. Extensive bibliographies (1032 references).

CEREBRAL PALSY--BIOGRAPHY

592. Carlson, Earl R.

Je suis ne comme ca; traduit avec la permission de l'auteur et editeurs par Madeleine Gerome. New York, Internatl. Soc. for the Welfare of Cripples (1956). 180 p. Paperbound.

French translation of "Born that way," by Earl R. Carlson.

The International Society for the Welfare of Cripples was enabled to publish and distribute this translation of the well-known biography of Dr. Carlson, who has been cerebral palsied from birth, through aid of the Gustave and Louise Pfeiffer Research Foundation and the Canadian Council for Crippled Children and Adults.

Available from the International Society for the Welfare of Cripples, 701 First Avenue, New York 17, N. Y., at \$1.00 a copy.

CHILDREN (DEPENDENT)

593. Cady, Ernest

How to adopt a child, by Ernest and Frances Cady. New York, Whiteside and William Morrow & Co., 1956. 189 p. \$3.00.

For the thousands of couples seeking to adopt a child this book offers essential information on all aspects of the adoption process. It covers the legal pitfalls, what is expected of adoptive parents, how a variety of adoption agencies work, the dangers in acquiring a child through the "black market" process, as well as a section on advice to parents who have already adopted a child. Of added value is a listing of all state licensed child-placement agencies which has previously not been readily available to the general public. Chapter II discusses adoption of the handicapped child.

DEAF--DIRECTORIES

594. Am. Annals of the Deaf. Jan., 1956. 101:1.

Annual directory issue.

The current year's directory and information issue of the Annals which is the reference source to personnel, facilities in educational, recreational, religious and therapeutic fields of service to the deaf, schools and classes in Canada, Australia and New Zealand, teacher training, publications review and statistics on American schools for the deaf.

Available from American Annals of the Deaf, Gallaudet College, Washington 2, D. C., at \$2.00 a copy.

EPILEPSY

595. Epilepsia, J. Internatl. League against Epilepsy. Nov., 1955. 3d ser., v.4.

Contains the annual bibliography of literature on epilepsy for the year 1954.

Contents: Neuronal structure, brain potentials and epileptic discharge, Mary A. B. Brazier. -Some cerebellar influences on electrically-induced cerebral seizures, P. M. Cooke and Ray S. Snider. -Effects of strychnine with special reference to spinal afferent fibres, P. D. Wall (and others). -Febrile convulsions, Richard P. Schmidt and Arthur A. Ward, Jr. -Problems in the EEG analysis of epileptic activity in patients with massive cerebral lesions, C. Ajmone Marsan and M. Baldwin. -Massive spasms in infancy and childhood, Ralph Druckman and Dora Chao. -Statistical studies of the different electro-clinical varieties of epilepsy, N. Bicaud, Y. Gastaut, and J. Roger. -Cognitive deficit in patients with psychomotor epilepsy, Angela Folsom Quadfasel and Paul Pruyser. -The reign of the uterus, William G. Lennox. -On changing social conceptions of epilepsy, Alvin W. Rose, Leon Peace and Merle McBride. -International League against Epilepsy: President's report, A. Earl Walker. -WHO research study group on juvenile epilepsy. -Pharmaceutical preparations in the treatment of epilepsy, R. Saunie and Ch. Vaille. -International list of anti-epilepsy drugs. -Bibliography; the literature of 1954.

Available from Dr. J. K. Merlis, Editor, 150 S. Huntington Avenue, Boston 30, Mass., at \$2.00 a copy.

MULTIPLE SCLEROSIS

596. McAlpine, Douglas

Multiple sclerosis, by Douglas McAlpine, Nigel D. Compston, and Charles E. Lumsden. Edinburgh, Scotland, E. & S. Livingston, 1955. 304 p. illus. \$7.00.

Based largely on the authors' own experiences of the disease, it covers such subjects as the geographical distribution of multiple sclerosis, etiological factors precipitating and aggravating the disease, early symptomatology (illustrated by case histories), clinical findings and differential diagnosis. In the chapter on treatment emphasis is on treating the person as well as the disease. Results of studies on the histology of the disease and its relationship to other members of the demyelinating group are examined critically; a final chapter discusses the cause of multiple sclerosis in the light of present day knowledge of its natural history and pathology.

597. International Poliomyelitis Congress

Poliomyelitis; papers and discussions presented at the Third International Poliomyelitis Conference, compiled and edited for the . . . Philadelphia, J. B. Lippincott Co., c1955. 567 p. illus., tabs.

". . . The proceedings of the Third Conference cover most of the aspects of the study and care of poliomyelitis, but give new emphasis also to the social aspects of the disease and its prevention . . . " -- Preface. All original manuscripts have been included in full; discussions and addresses have been condensed. One section covers physical medicine and rehabilitation in poliomyelitis.

SPECIAL EDUCATION--STUDY UNITS AND COURSES

598. Jenks, William F., ed.

Individual differences in elementary and secondary school children; the proceedings of the workshop on . . . conducted at the Catholic University of America, June 10 to 21, 1955. Washington, D. C., Catholic Univ. of America Pr., 1956. 224 p. tabs. Paperbound. \$2.75.

Contains the lectures and various reports of seminars at the fourth annual workshop on special education.

Contents: The place of the residential treatment center, Joseph J. Reidy. -The brain damaged child; results of intensive integrated therapy to a group of severely physically and mentally handicapped children of school age, William P. Argy. -The role of child guidance services in modern education, Frank J. O'Brien. -A well-rounded educational program for the mentally retarded child, Mary E. Harnett. -Psychological diagnosis, Sister M. St. Mary Orr. -News and views on special education in Catholic schools, Rev. William F. Jenks. -The need for an organized speech correction program as a fundamental part of the Catholic education of children, Letitia Raubicheck. -Identifying and planning for exceptional children in elementary and secondary parochial schools, Thomas W. Mulrooney. -Meeting individual differences in reading, Sister Mary Louise Shire. -Personality growth and development of exceptional children, Sister Mary Amatora. -The control of delinquency, Mary Elizabeth Walsh. Seminars on mental health, psychological problems underlying motivation and education of brain damaged children, remedial reading, mentally retarded and socially maladjusted, and on speech correction were included.

Available from Catholic University of America Press, 620 Michigan Avenue, N. E., Washington 17, D. C.

SPEECH CORRECTION

599. Beasley, Jane

Slow to talk; a guide for teachers and parents of children with delayed language development. New York, Teachers College, Columbia Univ., 1956. 109 p. (Teachers College ser. in education). \$2.75.

Dr. Beasley's approach to the problems of the child who is slow to talk is both practical and warmly human; she compares the similarity of needs of children who have not learned to talk with those of the normal speaking child, and shows parents and teachers how best to meet these needs. Practical procedures to be used in helping the child acquire language are discussed fully, always stressing that the child must be accepted and understood. In this concept, language is more than sound, the movement of lips and tongue, and the verbal expression of thought; it is linked with the child's total way of life. Parents and teachers alike will profit from the practical suggestions and from added insight on the child's development. A bibliography of 100 references is included.



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